

POSITION	INITIALS	ID NO.	DATE
	<i>F.F.</i>		<i>11-26-01</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			<i>1012-3-01</i>
FORMALITY REVIEW	<i>R.B.</i>	<i>1078</i>	<i>10100701</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
staple additional sheet here

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*10/1/01*  
*9/1/01*